

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA

101 EXECUTIVE CENTER DRIVE

COLUMBIA, SC 29210

POST OFFICE DRAWER 11649

COLUMBIA, SOUTH CAROLINA 29211

168839

CLASS C 2003.351-T DATE 12-3, 1903APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND
NECESSITY FOR OPERATION OF MOTOR VEHICLE CARRIER

Application is hereby made for a Certificate of Public Convenience and Necessity, in accordance with the provision of S.C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto.

1. Name under which business is to be conducted (corporation, partnership, or sole proprietorship, with or without trade name.)

Jill Contreras d/b/a

Myrtle Beach independent cab

2. (a) Street Address of Applicant 357 Appleton way

Myrtle Beach SC. 29579

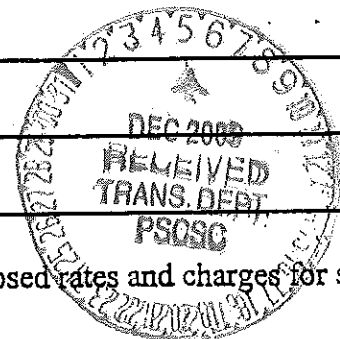
- (b) Mailing address, if different from street address

- (c) Telephone Number 843-222-9042

3. If incorporated, a copy of Articles of Incorporation must be attached. (If incorporated outside of SC, need SC Secretary of State "Foreign Corporation" Certificate.)
4. (a) If a partnership, names and addresses of all persons having an interest in the business. (b) If a corporation, names and addresses of two principal officers will be sufficient.

5. The proposed service to be provided and the proposed rates and charges for such service, per Exhibit "C" included herewith.

The proposed list of equipment is as per Exhibit "D" included herewith



7. Applicant is financially able to furnish the services as specified in this Application, and submits the following statement of assets and liabilities.

ASSETS:

Cash	<u>1,500</u>
Real Estates and Buildings	<u> </u>
Accounts and Notes Receivable	<u> </u>
Power Equipment (Net of Depreciation)	<u> </u>
Garage & Office Equipment	<u> </u>
(Net of Depreciation)	<u> </u>
Other Assets	<u> </u>

TOTAL ASSETS \$ 1,500

LIABILITIES:

Accounts and Notes Payable	<u> </u>
Rents and Leases payable	<u> </u>
Mortgages Payable	<u> </u>
Debt on Power Equipment	<u> </u>
Other Liabilities	<u> </u>

TOTAL LIABILITIES \$ 0

NET WORTH \$ 1,500

10. Applicant is familiar with the provision of S.C. Code Ann., §58-23-10, et seq. (1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (Vol.26, S.C. Code Ann., 1976), and R.38-400 through 38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Vol. 23A, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

STATE OF SOUTH CAROLINA,

COUNTY OF Horry

I, Jill Contreras Owner
(Name of Applicant's Representative) (Title)

of Myrtle Beach Independent Cab the Applicant for the Certificate of Public
(Applicant)

Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above Application are true and correct.

SWORN TO BEFORE ME

At South Carolina

This the 1st day of Dec 2003

Mary Frances Shipley
(Notary Public)

Jill Contreras
(Signature of Applicant's Representative)

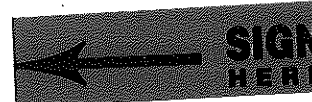


EXHIBIT C

CLASS C

TAXI ☒

CHARTER ☐

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA

Columbia, South Carolina

Applicant Myrtle Beach Independent Cab

For the transportation of passengers as follows:

Area to be served: Horry County

Number of passengers: 7

Fares: One dollar fifty cent start up, twenty five cents
per 1/8 of a mile

CERTIFIED CORRECT

Date 12/1/03

Jail Contreras
By

Owner
Title

EXHIBIT D

**STATE OF SOUTH CAROLINA
PUBLIC SERVICE COMMISSION**

DESCRIPTION OF EQUIPMENT

[illegible]

* Seats if passenger carrier or tonnage if freight carrier.

Myrtle Beach Independent Cab
(Applicant)

Date: 12/1/03

Jill Contreras
(Applicant's Representative)

Owner
(Title)

INSURANCE QUOTE

The following insurance quote is for:

Myrtle Beach Independent Cab
(Name of Motor Carrier)

357 Appleton Way Myrtle Beach SC 29579
(Address of Motor Carrier)

Amount of Premium:

Liability Insurance 2,592.00

Cargo Insurance N/A

The above quoted premiums are for a term of 12 months.

Canad Club
(Insurance Company Name)

P.O. Box 7, Greenville, SC
(Home Office Address of Company)

is familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.

12/01/03
Date

Joseph B. Ducey
(Authorized Insurance Company Representative)